STATEMENT OF

FORM 1	ORGANIZ. (See instruction			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Renewing the	American Dream PAC		111111	
ADDRESS	110 E. Liberty Stree	<u> </u>		
ADDRESS (number and street)	treet)			
(Check if address is changed)			<u> M</u> N	56001
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e			
(Check if address is changed)	shellihesselroth@g	mail.com 		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00475608		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	()	
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, corr	ect and complete	
Type or Print Name of	Treasurer Shelli Hesselrot	h		
Signature of Treasurer	Electronically Filed by Shelli He	sselroth	Date 03	01 / 2010
NOTE: Submission of fal	se, erroneous, or incomplete information ma	ay subject the person signing this	·	
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)